

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	2 Serial/Patent # 10/521206		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
Filing			10 Feb 85
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 500
		8 TO BE REFUNDED BY:	
10 REASON:		Treasury Check	
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
<input type="checkbox"/> Duplicate Payment		9 09-0458	
No Fee Due (Explanation):			
11 REFUND REQUESTED BY:		TITLE: <i>Parklogal</i>	
TYPED/PRINTED NAME: <i>B. Leedwell</i>		PHONE: 703-308-9140 ext 216	
SIGNATURE: <i>B. Leedwell</i>			
OFFICE: *****			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B